

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☒ 21

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NAME OF COMMITTEE (In Full)

Lewis For Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Gard for Congress

Mailing Address PO Box 277

City  
Green Bay

State  
WI

Zip Code  
54305

Purpose of Disbursement  
political contribution

Candidate Name  
John G. Gard

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: WI District: 08

Transaction ID: 1144455942917

Date of Disbursement

03 / 29 / 2006

Amount of Each Disbursement this Period

2000.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**B.** Geoff Davis for Congress Campaign Committee

Mailing Address 3161 Dixie Highway  
Suite F

City  
Erlanger

State  
KY

Zip Code  
41018

Purpose of Disbursement  
political contribution

Candidate Name  
Geoffrey C. Davis

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: KY District: 04

Transaction ID: 1144457937720

Date of Disbursement

03 / 29 / 2006

Amount of Each Disbursement this Period

2000.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**C.** Hayes for Congress

Mailing Address PO Box 2000

City  
Concord

State  
NC

Zip Code  
28026

Purpose of Disbursement  
political contribution

Candidate Name  
Robert Cannon Hayes

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NC District: 08

Transaction ID: 1144458948113

Date of Disbursement

03 / 29 / 2006

Amount of Each Disbursement this Period

2000.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

6000.00

**TOTAL** This Period (last page this line number only) .....